SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

				MBER	:	PAGE	17	774 OF	2	428
(cl	he	ck only	or	ne)						
[X	11a		11b		11c		12		
		13		14		15		16		17

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee					
REPUBLICAN NATIONAL (JOIVIIVII I EE					
Full Name (Last, First, Middle Initial) MS. MARTHA S. STRANG	Date of Receipt					
Mailing Address 644 N. LAS CASAS AVE	05 13 2015					
City	State Zip Code	Transaction ID : 2015M06L11AI05293				
PACIFIC PALISADES	CA 90272-3312	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	270.00				
Name of Employer	Occupation					
SELF-EMPLOYED	INTERIOR DESIGNER					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	540.00					
Full Name (Last, First, Middle Initial) MR. CURT STRATHMAN	Date of Receipt					
Mailing Address 32 7TH STREET SE	Mailing Address 32 7TH STREET SE					
City	State 7in Code	05 07 2015				
City LE MARS	State Zip Code IA 51031-2317	Transaction ID : 2015M06L11AI05294				
	in 51031-2317	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer	Occupation	7				
REQUESTED	REQUESTED					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	300.00					
Full Name (Last, First, Middle Initial) MR. JEFF P. STRATON		Date of Receipt				
Mailing Address 433 KOMEN COURT	05 04 2015					
City COLLEGEVILLE	Transaction ID : 2015M06L11AI05295 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	200.00				
Name of Employer	+					
B. BRAUN MEDICAL						
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General						
Other (specify) ▼	300.00					
SUBTOTAL of Receipts This Page (option	al)	770.00				
TOTAL This Period (last page this line nul	mber only)					